

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	BA	70385	9-22-99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AD	71696	9/9

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 0 ..... Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
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50	✓	✓	✓

Claim	Final	Original	Date
1	✓	✓	✓
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48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
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46	✓	✓	✓
47	✓	✓	✓
48	✓	✓	✓
49	✓	✓	✓
50	✓	✓	✓

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If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

PRINT CLAIM(S):

192

09/264547

INDEX OF CLAIMS

Claim	Date	Claim	Date
1	3/91	101	1/21/92
2	4/2/90	102	1/22/92
3	8/28/90	103	1/23/92
4	1/2/91	104	1/24/92
5	1/2/91	105	1/25/92
6	1/2/91	106	1/26/92
7	1/2/91	107	1/27/92
8	1/2/91	108	1/28/92
9	1/2/91	109	1/29/92
0	1/2/91	110	1/30/92
1	1/2/91	111	1/31/92
2	1/2/91	112	1/32/92
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4	1/2/91	114	1/34/92
5	1/2/91	115	1/35/92
6	1/2/91	116	1/36/92
7	1/2/91	117	1/37/92
8	1/2/91	118	1/38/92
9	1/2/91	119	1/39/92
0	1/2/91	120	1/40/92
1	1/2/91	121	1/41/92
2	1/2/91	122	1/42/92
3	1/2/91	123	1/43/92
4	1/2/91	124	1/44/92
5	1/2/91	125	1/45/92
6	1/2/91	126	1/46/92
7	1/2/91	127	1/47/92
8	1/2/91	128	1/48/92
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3	1/2/91	163	1/83/92
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8	1/2/91	168	1/88/92
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7	1/2/91	187	1/107/92
8	1/2/91	188	1/108/92
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2	1/2/91	192	1/112/92
3	1/2/91	193	1/113/92
4	1/2/91	194	1/114/92
5	1/2/91	195	1/115/92
6	1/2/91	196	1/116/92
7	1/2/91	197	1/117/92
8	1/2/91	198	1/118/92
9	1/2/91	199	1/119/92
0	1/2/91	200	1/120/92

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